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109-66 U.S. PTOPlease type a plus sign (+) inside this box 11-30-00
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PTO/SB/05 (8/05)

Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	03000- P0004C
		First Inventor	Wesley W. Whitmyer, Jr.
		Title	Web Site Automating Transfer of Intellectual
		Express Mail Label No.	EL570204548US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO:	
		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 10] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claims(s) - Abstract of the Disclosure 		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <ol style="list-style-type: none"> <input type="checkbox"/> Computer Readable Form (CRF) Specification Sequence Listing on: <ol style="list-style-type: none"> <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper <input type="checkbox"/> Statement verifying identity of above copies 	
ACCOMPANYING APPLICATION PARTS			
<p>4. <input checked="" type="checkbox"/> Drawings(s) (35 USC 113) Total Sheets 2</p> <p>5. Oath or Declaration Total Pages 2</p> <p>a. <input checked="" type="checkbox"/> New executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <i>(for continuation divisional with Box 17 completed)</i></p> <p><input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventors(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Other</p>	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

Continuation Divisional Continuation-in-part of prior application No 09/612,420

Prior application information Examiner Group/Art Unit

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number of Bar Code Label		24126	<input checked="" type="checkbox"/> Correspondence address below
<i>Insert Customer No. or Attach bar code label here</i>			
Name	Wesley W. Whitmyer, Jr.		
Address	St. Onge Steward Johnston & Reens LLC 986 Bedford Street		
City	Stamford	State	CT
Country	United States	Telephone	Zip Code
	203 324-6155		06905-5619
	Fax		203 327-1096

Name (Print/Type)	Todd M. Oberdick	Registration No. (Attorney/Agent)	44,268
Signature	<i>Todd M. Oberdick</i>		Date 11/29/00

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Times will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$ 355.00)

Complete if Known

Application No.	Pending
Filing Date	November 29, 2000
First Named Inventor	Wesley W. Whitmyer, Jr.
Examiner Name	
Group Art Unit	

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METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payment to

Deposit Account Number
19-4516

Deposit Account Name
St.Onge Steward Johnston & Reens LLC

Charge Any Additional Fee Required 37 CFR 1.16 and 1.17
 Applicant claims small entity status
See 37 CFR 1.27

2. Payment Enclosed

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee 355.00
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	780	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee
SUBTOTAL (1) (\$)				355.00

2. EXTRA CLAIMS FEES

Total Claims	10	-20**=	0	Extra Claims	Fee from Below	=	Fee Paid
Independent Claims	3	-3 =	0	X		=	-0-
Multiple Dependent				X		=	-0-
Large Entity Fee Code (\$)	103	18	203	9	Claims in excess of 20		
Small Entity Fee Code (\$)	102	80	202	40	Independent claims in excess of 3		
	104	270	204	135	Multiple dependent claims, if not paid		
	108	80	208	40	** Reissue independent claims over original patent		
	110	18	210	9	** Reissue claims in excess of 20 and over original patent		
** or number previously paid, if greater. For Reissues, see above							
SUBTOTAL (2) (\$)				-0-	* Reduced by Basic Filing Fee paid		

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
105	130	205	65	Surcharge – late filing for or oath		
127	50	227	25	Surcharge – late provisional filing or cover sheet		
139	130	139	130	Non-English specification		
147	2,520	147	2,520	For filing a request for ex parte reexamination		
112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
113	1,840*	113	1,840	Requesting publication of SIR after Examiner Action		
115	110	215	55	Extension for reply within first month		
116	390	216	195	Extension for reply within second month		
117	890	217	445	Extension for reply within third month		
118	1,390	218	695	Extension for reply within fourth month		
128	1,890	228	945	Extension for reply within fifth month		
119	310	219	155	Notice of Appeal		
120	310	220	155	Filing a brief in support of an appeal		
121	270	221	135	Request for oral hearing		
138	1,510	138	1,510	Petition to institute a public use proceeding		
140	110	240	55	Petition to revive – unavoidable		
141	1,240	241	620	Petition to revive – unintentional		
142	1,240	242	620	Utility issue fee (or reissue)		
143	440	243	220	Design issue fee		
144	600	244	300	Plant issue fee		
122	130	122	130	Petitions to the Commissioner		
126	240	126	240	Submission of Informational Disclosure Stmt		
581	40	581	40	Recording each patent assignment per Property (times number of properties)		
146	710	246	355	Filing a submission after final rejection (37CFR § 1.129(a))		
149	710	249	355	For each additional invention to be Examined (37 CFR 1.129(h))		
179	710	279	355	Request for Continued Examination (RCE)		
169	900	169	900	Request for expedited examination of a design application		
Other fee (specify) _____						

SUBTOTAL (2) (\$)

-0-

SUBTOTAL (3) (\$)

-0-

Complete (if applicable)

SUBMITTED BY St.Onge Steward Johnston & Reens LLC

Name (Print Type)	Todd M. Oberdick	Registration No (Attorney/Agent)	44,268	Telephone	203 324-6155
Signature	Todd M. Oberdick			Date	11/29/00

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